

The House Committee on Health and Human Services offers the following substitute to SB 156:

A BILL TO BE ENTITLED
AN ACT

1 To amend Chapter 11 of Title 31 of the Official Code of Georgia Annotated, relating to
2 emergency medical services, so as to extensively revise the duties of the Georgia Trauma
3 Care Network Commission; to revise definitions relating to trauma care; to provide for duties
4 of the State Office of EMS/Trauma relating to the state-wide trauma network; to revise
5 funding priorities; to abolish the Georgia Trauma Trust Fund; to establish the State Office
6 of EMS/Trauma; to amend Title 48 of the Official Code of Georgia Annotated, relating to
7 revenue and taxation, so as to provide that the proceeds from the state ad valorem tax are
8 deposited into the Georgia Trauma Trust Fund for trauma care; to provide for effective dates,
9 contingency, and applicability; to provide for automatic repeal under certain circumstances;
10 to provide for related matters; to repeal conflicting laws; and for other purposes.

11 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

12 **SECTION 1.**

13 Chapter 11 of Title 31 of the Official Code of Georgia Annotated, relating to emergency
14 medical services, is amended by revising Article 5, relating to the Georgia Trauma Care
15 Network Commission, as follows:

16 "ARTICLE 5

17 31-11-100.

18 As used in this article, the term:

19 (1) 'Readiness' means:

20 (A) Maintaining a hospital's designation as a trauma center and its readiness to treat
21 seriously injured patients at any time;

22 (B) Maintaining multispecialty medical staff support for trauma patient care; 24 hour
23 operating room availability; necessary staff in the emergency department, laboratory,
24 and radiology department to maintain 24 hour availability; trauma center management

support; training of providers; trauma physician support personnel; injury prevention and outreach programs; social services and family support; and transportation services;

(C) Equipment necessary to maintain trauma center status;

(D) Providing uncompensated care to trauma patients by a trauma center;

(E) Maintaining a communications system among trauma care providers, hospitals, trauma centers, and emergency medical services providers to assure prompt access to the most appropriate trauma center; and

(F) Emergency medical services to support ambulance service availability for transport of trauma patients.

(2) 'State Office of EMS/Trauma' means the office established pursuant to Code Section 31-11-13.

~~(1)~~(3) 'Trauma center' means a facility which is:

(A) Designated ~~designated~~ by the ~~Department of Human Resources~~ State Office of EMS/Trauma as a Level I, II, III, or IV trauma center pursuant to guidelines approved by the Georgia Trauma Care Network Commission, except as provided in paragraph (4) of subsection (a) of Code Section 31-11-102, which shall be substantially based on criteria set forth by the American College of Surgeons; or

(B) Designated by the State Office of EMS/Trauma as a burn center pursuant to guidelines approved by the Georgia Trauma Care Network Commission.

(4) 'Trauma network' or 'network' means the state-wide trauma system established pursuant to this article of emergency medical services providers, trauma centers, and physicians and other health care personnel providing care at a trauma center. Such trauma network shall be designed to provide emergent care within a system planning and policy-making structure at local, regional, and state levels; consist of a comprehensive communications system among network members; and be designed to ensure prompt delivery of appropriate trauma care for the state. The network may include, if appropriate, members outside the state but in close proximity to the state.

~~(2)~~(5) 'Trauma patient' means a patient who, if presenting at a trauma center, would qualify for is on the State Trauma Registry pursuant to guidelines approved by the Georgia Trauma Care Network Commission or the National Trauma Registry of the American College of Surgeons.

~~(3) 'Trauma service codes' means the ICD A-9-CM discharge codes designated as trauma service codes by the American College of Surgeons, Committee on Trauma.~~

~~(4)~~(6) 'Uncompensated care' means care provided by a designated trauma center, emergency medical services provider, or physician treatment provided to a trauma patient as defined by the Georgia Trauma Care Network Commission who by a designated trauma center or by physicians or other health care personnel providing care at a trauma

center or transportation provided to a trauma patient by an ambulance service that meets guidelines approved by the Georgia Trauma Care Network Commission when such patient:

(A) Has no medical insurance, including federal Medicare Part B coverage;

(B) Is not eligible for medical assistance coverage;

(C) Has no medical coverage for trauma care through workers' compensation, automobile insurance, or any other third party, including any settlement or judgment resulting from such coverage; and

(D) Has not paid at least 10 percent of total charges for the trauma care provided by the trauma provider after documented attempts by the trauma care services provider to collect payment.

31-11-101.

(a) There is created the Georgia Trauma Care Network Commission which is assigned to the ~~Department of Human Resources~~ department for administrative purposes only, as prescribed in Code Section 50-4-3. The commission shall consist of nine members who shall be appointed as provided in this Code section. Five members shall be appointed by the Governor. The Governor shall include among his or her appointees a physician who is actively involved in providing emergency trauma care, a representative of a hospital that is a designated trauma center, and a representative of a state 9-1-1 zone licensed emergency medical services provider. Two members shall be appointed by the Lieutenant Governor. Two members shall be appointed by the Speaker of the House of Representatives. In making the initial appointments, the Governor shall appoint three members for a term of four years and two members for a term of two years, the Lieutenant Governor shall appoint one member for a term of four years and one member for a term of two years, and the Speaker of the House of Representatives shall appoint one member for a term of four years and one member for a term of two years. Thereafter, persons appointed to succeed the initial members shall serve four-year terms of office. The Governor shall appoint one of the members to serve as the chairperson of the commission.

(b) The commission shall meet upon the call of the chairperson or upon the request of three members. The commission shall organize itself as it deems appropriate and may elect additional officers from among its members.

(c) Any vacancy on the commission shall be filled for the unexpired term by appointment by the original appointing authority.

(d) Members of the commission shall serve without compensation but shall receive the same expense allowance per day as that received by a member of the General Assembly for each day such member of the commission is in attendance at a meeting of such

commission, plus either reimbursement for ~~actual~~ reasonable transportation costs while traveling by public carrier or the same mileage allowance for use of a personal car in connection with such attendance as members of the General Assembly receive. Such expense and travel allowance shall be paid in lieu of any per diem, allowance, or other remuneration now received by any such member for such attendance.

31-11-102.

(a) The Georgia Trauma Care Network Commission shall have the following powers and duties:

(1) To review and recommend funding sources that will ensure maintenance of the state-wide trauma network to include fees, waiver programs, and increases in Medicaid reimbursement;

(2) To allocate funds, capped by the amount appropriated or received for the purposes of the commission, based on a fee or grant schedule which takes into consideration the number and severity of patients served and the percentage of patients receiving uncompensated care. The commission shall have discretion to give added weight in the funding formula to support trauma centers which incur a greater burden of uncompensated care;

(3) With the support and expertise of the State Office of EMS/Trauma and outside parties as needed, to formulate policy and approve guidelines which shall govern the development, operations, and evaluation of the state-wide trauma network;

(4) To create and update on an annual basis a strategic plan for operations and expansion of a state-wide trauma network with the goal that all hospitals with an emergency room will become a part of the trauma network with at least a Level IV designation; provided, however, that no hospital with over 200 beds as of July 1, 2009, shall be designated as a Level III or IV trauma center;

(5) To establish and monitor outcomes measures and accountability standards for the trauma network as a whole and for individual trauma network members based on best practices and findings reported by the State Office of EMS/Trauma; and

(6) To furnish a report on all activities relating to the trauma network by February 1 of each year. Such report by the commission shall include an accounting of the moneys received and expended and evaluation of all expended moneys. The report shall be made available to the Governor, the Lieutenant Governor, the Speaker of the House of Representatives, the members of the Board of Human Resources, and, upon request, to members of the public.

(b) The Georgia Trauma Care Network Commission shall ~~have the~~ approve guidelines for the State Office of EMS/Trauma in carrying out the following duties and responsibilities:

(1) To serve as the lead agency, under the commission's policy-making authority, for trauma network development, operations, and evaluation in Georgia, including serving as the regulatory and administrative authority for the trauma network;

~~(1)(2) To apply for, receive, and administer state funds appropriated to the commission and federal funds and grants, private grants and donations, and other funds and donations appropriated or donated for purposes of the readiness, operation, maintenance, and oversight of a state-wide trauma network. The commission's annual distributions for the trauma network shall be capped and limited to funds received from the sources specified in this paragraph. The commission shall ensure that its funds are not used as a supplement or secondary payor to any other third-party payor;~~

~~(2)(3) For the first two fiscal years in which funds are appropriated to the commission for distribution, to distribute such funds in the following areas with the priority for distribution to be set by majority vote of the commission. To distribute such funds based on the priority for distribution established by the commission.~~

(A) These priorities shall include the following order of priorities for state funds, recognizing that the state's primary obligation is to establish readiness:

~~(A) Physician uncompensated trauma care services provided in designated trauma centers;~~

~~(B) Emergency medical service uncompensated trauma care services provided to patients transported to designated trauma centers;~~

~~(C) Uncompensated trauma care services of designated trauma centers;~~

~~(D) Trauma care readiness costs for designated or certified trauma care service providers; and~~

~~(E) Trauma care service start-up costs for providers seeking a trauma care designation or certification.~~

(i) Supporting readiness of a state-wide trauma network;

(ii) Strengthening emergency medical services, particularly in rural areas;

(iii) Developing state-wide trauma transfer/communications systems;

(iv) Building trauma network infrastructure within the State Office of EMS/Trauma; and

(v) Establishing mechanisms to assure exceptional accountability.

(B) Other priorities may include, as set by majority vote of the commission and only after the priorities in subparagraph (A) of this paragraph are distributed, the following, with any available funds:

(i) Support for costs of uninsured patients who require burn care in a designated burn center;

(ii) Support for costs of telemedicine used at a trauma center;

(iii) Support for initiatives to reduce traumatic injury in Georgia; and

(iv) Support for planning, policy development, and administration by the commission;

~~The commission shall adopt a formula that prioritizes the distribution of state appropriated funds that may be implemented during the third state fiscal year in which funds are appropriated to the commission for distribution. Such formula shall be evaluated and modified, if needed, every two years thereafter;~~

(4) To distribute the funds allocated by the commission pursuant to paragraph (2) of subsection (a) of this Code section;

(5) To annually prepare a proposed budget based on the prioritized needs established by the commission. The proposed budget shall be approved by majority vote of the commission. Nothing in this Code section shall be construed to grant authority to the commission to approve or reject the actual budget for the State Office of EMS/Trauma; and

~~(3)(6) To develop, implement, and administer, and maintain a system to compensate designated trauma centers for a portion of their cost of readiness through in which participants submit a detailed statement of readiness costs in order to receive a semiannual distribution of funds, with criteria for uncompensated care assuring that from the Georgia Trauma Trust Fund in a standardized amount determined by the commission. The standardized amounts shall be determined according to designation level and shall be capped at that specific amount. Initially, such standardized amount shall be based upon a three-year average of annual trauma cases, annual amount of uncompensated trauma care services administered, and a three-year annual average cost of readiness. Such criteria may be changed by a majority vote of the commission. Total annual distributions for trauma center and emergency medical service readiness shall be capped at an amount set by the commission. However, the standards developed by the commission for readiness shall include, but are not limited to, the following:~~

~~(A) Criteria assuring the trauma fund is a payor of last resort;~~

~~(B) Criteria assuring that all All other resources ~~must be~~ are exhausted before the trauma funds are allocated and that the appropriate funds represent the payor of last resort; and~~

~~(C)(B) Criteria assuring that trauma Trauma funds ~~must be~~ are used to meet a verified need that assists the trauma center to maintain a trauma center designation;~~

(C) Trauma funds are used for reimbursement for services provided in the treatment of trauma patients by designated trauma centers, physicians providing services at trauma centers, and emergency medical services providers who transport trauma patients without regard to a hospital's designation; and

(D) Trauma funds used for reimbursement for trauma care costs are on a fee schedule or grant basis; provided, however, that no reimbursement shall exceed the average rate reimbursed for similar services under the State Health Benefit Plan or another fee schedule approved by the commission.

(c) With the approval of the commission, the State Office of EMS/Trauma is authorized to contract with third parties to effectuate its duties under this Code section.

(d) The commission shall not establish rules, regulations, policies, or guidance over the State Office of EMS/Trauma beyond any authority expressly granted in this article.

~~(4) To develop, implement, administer, and maintain a system to provide additional designated trauma center compensation to cover trauma center costs not associated with readiness based upon an application and review based process. These distributions shall be capped and limited to semiannual appropriations received by the commission. Designated trauma centers shall submit an application for trauma funds reimbursement semiannually. The application process developed by the commission for such costs shall include, but is not limited to, the following:~~

~~(A) Criteria assuring that the trauma fund is a payor of last resort;~~

~~(B) Criteria assuring that trauma funds shall be used for reimbursement for services provided to designated trauma patients;~~

~~(C) Criteria assuring that trauma funds shall be used for reimbursement for trauma service codes;~~

~~(D) Criteria assuring that trauma funds used for reimbursement for trauma care costs shall be on a fee schedule or grant basis; provided, however, that no reimbursement shall exceed the average rate reimbursed for similar services under the State Health Benefit Plan; and~~

~~(E) Criteria that require the trauma center to submit a semiannual report documenting and verifying the use of such funds;~~

~~(5) To develop, implement, administer, and maintain a system to compensate physicians who provide uncompensated call and trauma care services. This reimbursement shall be distributed on a semiannual basis and paid on a formula to be set by the commission. The call hours must be documented and verified by the trauma director at the appropriate trauma center in order to receive such funds. The formula developed by the commission for reimbursement shall include, but is not limited to, the following:~~

~~(A) Criteria assuring that the trauma fund is a payor of last resort;~~

~~(B) Criteria assuring that trauma funds shall be used for reimbursement for services provided to designated trauma patients;~~

~~(C) Criteria assuring that trauma funds used for reimbursement for physician costs shall be on a fee schedule or grant basis; provided, however, that no reimbursement~~

shall exceed the average rate reimbursed for similar services under the State Health Benefit Plan; and

~~(D) Criteria assuring that trauma funds shall be used for reimbursement for trauma service codes;~~

~~(6) To reserve and disburse additional moneys to increase the number of participants in the Georgia trauma system. These funds shall be disbursed through an application process to cover partial start-up costs for nondesignated acute care facilities to enter the system as Level II, III, or IV trauma centers. The application process developed by the commission for start-up costs shall include, but is not limited to, the following:~~

~~(A) Criteria assuring that the trauma fund is a payor of last resort;~~

~~(B) Criteria assuring that all other resources for start-up costs must be exhausted before the trauma funds are allocated;~~

~~(C) Criteria assuring that the distribution of trauma funds will result in the applicant's achieving a trauma designation as defined by the commission within the time frame specified on the application;~~

~~(D) Criteria assuring and verifying that the Department of Human Resources has determined that there is a need for an additional trauma center with the designation that the applicant is seeking; and~~

~~(E) Criteria assuring that no more than 15 percent of the total annual distribution from the trauma fund total shall be distributed for new trauma center development;~~

~~(7)(A) To develop, implement, administer, and maintain a system to compensate members of the emergency medical service transportation community for readiness and uncompensated trauma care.~~

~~(B) The compensation for the cost of readiness shall be through an application process adopted by the commission. The application process developed by the commission for readiness costs shall include, but is not limited to, the following:~~

~~(i) Criteria assuring that the trauma fund is a payor of last resort;~~

~~(ii) Criteria assuring that all other resources for readiness costs must be exhausted before the trauma funds are allocated;~~

~~(iii) Criteria assuring that the distribution of trauma funds will result in the applicant's achieving certification as defined by the commission within the time frame specified on the application; and~~

~~(iv) Criteria assuring and verifying that the Department of Human Resources has determined that there is a need for additional emergency medical services with the certification that the applicant is seeking.~~

~~(C) The commission shall develop a formula for reimbursing emergency medical services uncompensated trauma care services. The formula developed by the commission for reimbursement shall include, but is not limited to, the following:~~

~~(i) Criteria assuring that the trauma fund is a payor of last resort;~~

~~(ii) Criteria assuring that trauma funds shall be used for reimbursement for services provided to designated trauma patients; and~~

~~(iii) Criteria assuring that trauma funds used for reimbursement of emergency medical service costs shall be on a fee schedule or grant basis; provided, however, that no reimbursement shall exceed the average rate reimbursed for similar services under the State Health Benefit Plan;~~

~~(8) To appropriate, out of the Georgia Trauma Trust Fund, annual moneys for investment in a system specifically for trauma transportation. The purpose of this system is to provide transport to trauma victims where current options are limited. The commission shall promulgate rules and regulations for such system and shall pursue contracts with existing state transportation structures or create a contractual arrangement with existing transportation organizations. The commission shall also be responsible for creating, maintaining, and overseeing a foundation to raise funds specifically for investment in this system and overall trauma funding;~~

~~(9) To act as the accountability mechanism for the entire Georgia trauma system, primarily overseeing the flow of funds from the Georgia Trauma Trust Fund into the system. The State Office of EMS/Trauma shall receive an annual distribution from the commission of not more than 3 percent of the total annual distribution from the fund in the fiscal year. These funds shall be used for the administration of an adequate system for monitoring state-wide trauma care, recruitment of trauma care service providers into the network as needed, and for research as needed to continue to operate and improve the system;~~

~~(10) To coordinate its activities with the Department of Human Resources;~~

~~(11) To employ and manage staff and consultants in order to fulfill its duties and responsibilities under this article;~~

~~(12) To establish, maintain, and administer a trauma center network to coordinate the best use of existing trauma facilities in this state and to direct patients to the best available facility for treatment of traumatic injury;~~

~~(13) To coordinate, assist, establish, maintain, and administer programs designed to educate the citizens of this state on trauma prevention;~~

~~(14) To coordinate and assist in the collection of data to evaluate the provision of trauma care services in this state;~~

~~(15) To study the provision of trauma care services in this state to determine the best practices and methods of providing such services, to determine what changes are needed to improve the provision of trauma care services, and to report any proposed legislative changes to the General Assembly each year; and~~

~~(16) To employ an executive director and other staff and to establish duties and responsibilities of such persons.~~

~~31-11-103.~~

~~There is established the Georgia Trauma Trust Fund. The executive director of the Georgia Trauma Care Network Commission shall serve as the trustee of the Georgia Trauma Trust Fund. The moneys deposited into such fund pursuant to this article may be expended by the executive director with the approval of the Georgia Trauma Care Network Commission for those purposes specified in Code Section 31-11-102."~~

SECTION 2.

Said chapter is further amended by adding a new Code section to read as follows:

"31-11-13.

There is hereby established the State Office of EMS/Trauma which shall have such duties as assigned to it by the department and by law."

SECTION 2A.

Title 48 of the Official Code of Georgia Annotated, relating to revenue and taxation, is amended by revising Code Section 48-5-8, relating to the manner and time of making the state ad valorem levy, as follows:

"48-5-8.

(a) The levy for state taxation shall be made by the Governor with the assistance of the commissioner. Each year, as soon as the value of the taxable property is substantially known by the commissioner, the commissioner shall assist the Governor in making the state levy. Immediately after the Governor has made the state levy, the commissioner shall send to each tax collector and tax commissioner written or printed notices of the Governor's order.

(b) An amount equal to the proceeds from the state levy received each fiscal year shall be deposited into the Georgia Trauma Trust Fund created pursuant to Code Section 31-11-103 for the purposes set forth in Code Section 31-11-102."

347 **SECTION 2B.**

348 (a) Except as provided for in subsection (b) of this section, this Act shall become effective
349 on July 1, 2009.

350 (b) Section 2A of this Act shall become effective on January 1, 2011, and shall be
351 applicable to all taxable years beginning on or after January 1, 2011, provided that a
352 constitutional amendment to Article VII, Section I, Paragraph II(a) of the Constitution
353 authorizing the dedication of the state ad valorem tax to fund a trauma trust fund is passed
354 and ratified in the 2010 November general election. Otherwise, Section 2A of this Act
355 shall stand repealed by operation of law on January 1, 2011.

356 **SECTION 3.**

357 All laws and parts of laws in conflict with this Act are repealed.